## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| In re U                        | .S. Patent Application  | )                          |
|--------------------------------|---|----------------------------|
| TAKESHITA et al.               |   | ) Art Unit 1632            |
| Application Number: 10/812,895 |   | ) Examiner Marcia S. Noble |
| Filed:                         | March 31, 2004  | )                          |
| For:                           | Apparatus for Microinjection of Sample into Amphibian Oocytes | )<br>)                     |
| Attorne                        | ey Docket No. HIRA.0147                                       | )                          |

Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **COVER LETTER**

Sir:

[x] The fee for submission of claims is calculated as shown below:

| For   | TOTAL WITH<br>NEW CLAIMS<br>ADDED | TOTAL<br>CURRENTLY ON<br>FILE | CLAIMS<br>ALREADY PAID | RATE    | CALCULATION |
|---|-----------------------------------|-------------------------------|------------------------|---------|-------------|
| Total Claims  | 4                                 | 4                             | (Over 20)              | x \$50  | 0           |
| Independent<br>Claims   | 2                                 | 2                             | (Over 3)               | x \$200 | 0           |
| MULTIPLE<br>DEPENDENT<br>CLAIM(S)                                 |                                   |                               |                        | + \$360 | 0           |
| REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27 |                                   |                               | 7, 1.28).              | x ½     |             |
|   |                                   |                               | ТОТА                   | L       | 0           |

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

| [x] | Response to Office Action        | [ ] Petition for Extension of Time ( month) |
|-----|----------------------------------|---|
|     | (with Claim Amendments)          | [x] Terminal Disclaimer                     |
| [ ] | Substitute Specification         | [ ] Letter to Draftsperson                  |
| Ĩ Ī | Preliminary Amendment            | [ ] Assignment                              |
| [ ] | Information Disclosure Statement | [ ] Other                                   |
|     |                                  |   |

| [ ]   | Please charge my <b>Deposit Account Number</b> in the amount of to cover the fees for A duplicate copy of this paper is enclosed.  |  |  |  |  |
|-------|--|--|--|--|--|
| [ x ] | A check in the amount of \$130.00 to cover the Terminal Disclaimer fee is enclosed.  |  |  |  |  |
| [ x ] | The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to <b>Deposit Account Number 08-1480</b> . |  |  |  |  |
|       | Respectfully submitted,  |  |  |  |  |
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|       | Registration No. 34,072  |  |  |  |  |

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